

**NON-PROVISIONAL
UTILITY PATENT APPLICATION
TRANSMITTAL - 37 CFR 1.53(b)**

☐ **Duplicate**
(check, if applicable)

MAIL STOP PATENT APPLICATION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Attorney Docket No.: 9249-52U1
First Named Inventor: Gary D. Giegerich, *et al.*
Express Mail Label No.: EV343988633US
Total Pages of Transmittal Form: 2



Transmitted herewith for filing is the non-provisional utility patent application entitled:

GAME EQUIPMENT SUPPORT STRUCTURE

which is:

an ☒ Original; or

a ☐ Continuation, ☐ Divisional, or ☐ Continuation-in-part (CIP)
of prior Application No. &@ filed&@.

Anticipated Group/Art Unit: &@ or Class &@, Subclass &@.

☒ This non-provisional patent application is based on Provisional Patent Application No.
60/441,041, filed January 17, 2003.

Enclosed are:

- ☒ Specification (including Abstract) and claims: 10 pages.
- ☒ 7 sheets of drawings (formal).
- ☐ Application Data Sheet.
- ☒ Newly executed Declaration (copy of original).
- ☐ Copy of Declaration from prior application.
- ☐ Separate Power of Attorney (including 37 CFR 3.73(b) statement, if applicable).
- ☐ Microfiche computer program (Appendix).
- ☐ Nucleotide and/or Amino Acid Sequence Submission, including:
- ☐ Computer readable copy ☐ Paper Copy ☐ Verified Statement.
- ☒ Under PTO-1595 Cover Sheet, an assignment of the invention
- ☒ Name of Assignee: **DMI Sports, Inc.**
- ☐ Certified copy(ies) of &@ Application No(s). &@ filed &@ is/are filed:
☐ herewith or ☐ in prior application &@.

- ☒ Applicant(s), by its/their undersigned attorney, claim(s) Small Entity Status under 37 C.F.R. §1.27 as ☐ an Independent Inventor, or ☒ a Small Business Concern, or ☐ a Non-Profit Organization.
- ☐ Preliminary Amendment.
- ☐ Information Disclosure Statement, PTO/SB/08A, and cited references.
- ☐ Request for Nonpublication of Application Under 35 U.S.C. §122(b)
- ☐ Other: &@

The filing fee is calculated as follows:

			SMALL ENTITY			LARGE ENTITY	
CLAIMS	NO. FILED	NO. EXTRA	BASIC FEE: \$375			BASIC FEE: \$750	
Total	5 - 20 =	-0-	X9	\$-0-	OR	X18	\$-0-
Independent	2 - 3 =	-0-	X42	\$-0-	OR	X84	\$-0-
<input type="checkbox"/> Multiple Dependent Claims Present			\$140	\$-0-	OR	\$280	\$-0-
			TOTAL	\$375.00	OR	TOTAL	\$-0-

- ☐ The Commissioner is not authorized to charge the filing fee at this time as we elect to defer payment of the entire filing fee until receipt of a Notice to File Missing Parts
- ☒ A check in the amount of **\$375.00** to cover the filing is enclosed.
- ☒ The Commissioner is hereby authorized to charge and/or credit **Deposit Account No. 50-1017 (Billing No. 209249.0061)** as noted below. A duplicate copy of this sheet is enclosed.
- ☒ Any overpayments or deficiencies in the above-calculated fee.
- ☐ Filing fee in the amount of \$_____ as calculated above.
- ☒ Any additional fees required under 37 C.F.R. § 1.16 and § 1.17.
- ☒ In the event that a Petition for Extension of Time is required during the prosecution of this application, but not submitted, please charge any extension fee under 37 C.F.R. § 1.136(a) to our Deposit Account noted above.

CORRESPONDENCE ADDRESS

9/18/03

(Date)

By:



Reg. No. 48955
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LESLIE L. KASTEN, JR.

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LLK:KBG:cbf

Enclosures